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S.D. SEC. OF STATE

State of South Dakota Statement of Financial Interest Elected Official

12354

File statement within 15 days after taking your oath of office in the office where your nominating petition or convention nomination certification was filed. Please read information on reverse side before completing this form.

| ************************************** | |
|--|--|
| 1. Name JASON M. GA | WT. |
| 2. Address PD Box 885 A | erre, 51 57501 |
| 3. Elected Office SECRETARY OF S | TATE |
| If there is no change in your financial interest since the filing of y and return. | our post nomination statement of financial interest, please sign |
| Date: (Signed) | Holf fant |
| If there are changes, please complete the following: | |
| 4. What is your occupation/profession? | |
| 5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise. | What is the nature of your immediate family's association with each? The value of the financial interest need not be reported. |
| | |
| | |
| 6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise. | What is the nature of your immediate family's association with each? |
| | poor Jane |
| State of South Dakota) County of Hughes) SS. | Verification |
| I have reviewed paragraphs 1 through 6 of the Information Reg Statement of Financial Interest and certify that the information my financial interests for the preceding calendar year. | garding Statement of Financia/Interest (attached), my reported is a complete, true/and afficurate representation of |
| Sworn to before me this 12th day of anware, 2 | OU SANT |
| (Seal) | Juan a. Larson |
| Revised 1997 | Officer Administering Oath My commission expires: 4-18-14 |